PTO/SB/06 (08-03)
Approved for use through 7/31/2006, OMB 0651-0002
U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Bocket Number Substitute for Form PTO-875 643680 CLAIMS AS FILED - PART I OTHER THAN (Cotumn 1) SMALL ENTITY (Cotumn 2) OR SMALL ENTITY FOR NUMBER FILED MUMBER EXTRA RATE BASIC FEE (37 OFR 1.16(a)) FEE RATE FEF OR YOYAL CLAIMS (37 CFR 1.16(d)) minus 20 · XI OR . INDEPENDENT CLAIMS D7 OFR 1.16(b)) 3 0 x s OR X 1 MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d)) OR $^{\circ}$ If the difference in column 1 is less than zero, enter $^{\circ}$ 0° in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II (Column 2) OTHER THAN (Column 3) · OR SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PREVIOUSLY 131/06 PRESENT RATE ADDI-TIONAL RATE EXTRA ADDI-TIONAL AMENDMENT PAID FOR FEE Total (17 CFR 1.10(c)) Minus ENDM 64 0

TOTAL

ADDITEE

RATE

OR

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OR

ADDI-TIONAL

FEE

TOTAL ADD'L FEE

RATE

ADDI-TIONAL

FEE

AME	FIRST PRESENT	TATION OF MULTIP	E DEPEND	DENT CLAIM (37 C	FR 1.15(d))	+s ==		OR OR	+3	300
Ì						ADD'L FEE		OR	ADD'L FEE	
1		(Column 1)		(Cotumn 2)	(Column 3)					
AMENDMENT C	***	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
Q	Total CF CFR LISCO	63	Minus	69	• /	11 0	756			FEE/
EN	Cricia 1.1600	6	Minus	//	- /	\^*		CR	× 8	<u> </u>
₹						X \$		OR	X \$	
PAST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1, (6(d))						+3 -		OR	+1	
:	If the entry in co	olumn 1 is less tha	n the entr	y in calumn 2, writi	o To to contumen 3	ADD'L FEE		OR	TOTAL ADD'L FEE	

(Cotumn 3)

PRESENT

EXTRA

Independent (27 GFR 1,140))

Total (07 CFR 1.10(s))

8

ENT

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

Minus

(Column 2)

HIGHEST

MUMBER

PAID FOF

(Cotumn 1)

CLAIMS

REMAINING

AFTER

ENDMENT

If the entry in column 1 is less than the entry in column 2, write "O' in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petern and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.